



California Department of Forestry and Fire Protection
Office of the State Fire Marshal
California All Incident Reporting System

FIRE DEPARTMENT INFORMATION CHANGE NOTICE

To update information regarding a fire department already issued a Fire Department Identification (FDID) Number by the California Department of Forestry and Fire Protection (CDF), Office of the State Fire Marshal (SFM), please complete the information below and mail to:

California Department of Forestry and Fire Protection
Office of the State Fire Marshal
California All Incident Reporting System
P. O. Box 944246
Sacramento CA 94244-2460

Check box
below if entry
is a change

FDID Number: _____

Date Information Submitted to SFM: _____

- ☐ Department Name: _____
- ☐ Mailing Address: _____
- ☐ City: _____ Zip: _____
- ☐ Headquarters Address: _____
- ☐ City _____ Zip: _____
- ☐ Phone Number: _____ Fax: _____
- ☐ Fire Chief: _____
- ☐ OES Designator: _____ Email address (optional): _____
- ☐ TYPE: City____ County____ District____ Private____ State____ Federal____
- ☐ STATUS: Paid____ Mostly Paid____ Volunteer____ Mostly Volunteer____
- ☐ Deactivate FDID:_____ Merged with: _____ FDID:_____
- (Name of Department)
- ☐ Reactivate FDID:_____

COMMENTS: _____

Submitted by: _____ Title: _____

"Thank you, in advance, for sharing your updated information with the SFM"

Questions or Comments? Contact Penny.Nichols@fire.ca.gov or telephone: (916) 445-8435

For Internal Use Only:

Verified by: _____ Method of Verification: _____ Date: _____

FDID Database Updated by: _____ Date updated: _____

Date Information sent to CSFA: _____ CPF: _____ State Fire Training: _____